PATENT APPLICATION FEE DETERMINATION RECORD												plication	or U	ocket Mun	nber ·
Effective December 29, 1999												484	-+	1011	
CLAIMS AS FILED - PART I (Column 1) (Column 2)										SMAL		ENTITY	OR	OTHER SMALL	
FQR			NUMBER FILED			NUMBER EXTRA				RATE		FEE	1	RATE	FEE
BASIC FEE												345.00	OR		690.00
TOTAL CLAIMS			minus 20=			. 17				X\$ 9=			OR	X\$18=	276
INDEPENDENT CLAIMS				e minus	. 3				X39=			OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT										+130=	_			+260=	23.1
• 11	* If the difference in column 1 is less than zero, enter "0" in column 2												OR OR	TOTAL	
1	118/00 0	MENDE		TOTA	- 1		JON	OTHER	THAN						
	(Column 1) (Column 2) (Column 3)									SMAL	L E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		REN A	MAINING FTER NOMENT		PF	NUMBER EVIOUSLY PAID FOR		RESENT		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠ ،	77	Minus	••	37	=	U		X\$ 9≈	-		OR	X\$18=	U
	Independent	NTATI	ON OF MI	Minus	PENIO	ENT CLAIM	=	٥	ſ	X39=			OR	X78=	U
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+130=			OR	+260=	
6/2/22									L	TOTA			I	TOTAL ADDIT, FEE	0
			umn 1)		(C	olumn 2)	(Co	lumn 3)	^	DUIT. FE	: C &			ADDII. FEET	
AMENDMENT B		REM A AMEI	AIMS IAINING FTER NOMENT		PR	HIGHEST NUMBER EVIOUSLY PAID FOR		ESENT XTRA		RATE	•	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 3	8	Minus	••	37	=			X\$ 9=			OR	X\$18=	18
	Independent FIRST PRESE	NTATIO	N OF MI	Minus	***	ENT CLAIM	=		Γ	X39=			OR	8778=	8K
										+130=			OR	+260=	
									Al	TOTA			OR ,	TOTAL ADDIT, FEE	102
			umn 1)			olumn 2)	(Co	lumn 3)							
AMENDMENT C		REM A	AIMS AINING FTER IDMENT		PR	GHEST JMBER VIOUSLY JID FOR		ESENT XTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	••		=		Γ	X\$ 9=	T		OR	X\$18=	
	Independent	•		Minus	***		=		t	X39=	T		ı	X78=	
	FIRST PRESE	NTATIC	ON OF ML	ILTIPLE DEF	PEND	ENT CLAIM			-		+		OR		· ·
• 1	f the entry in colu	mn 1 is l	ess than th	e entry in colu	mn 2,	write "0" in col	י תחש	3.		+130= TOTA			OR	+260=	
**	f the "Highest Nu If the "Highest Nu	mber Pre	eviously Pa	id For IN THIS aid For IN THIS	S SPA S SPA	CE is less that CE is less that	n 20, n 3, e	enter "20." inter "3."		DIT. FE	ΕL			TOTAL ADDIT. FEE	
	The "Highest Num	ber Pre	viously Paid	d For (Total or	indep	endent) is the	high	est number	foun	d in the a	appn	opriate box	in colu	ımn 1.	İ

FORM PTO-875 (Rev. 12/99)

Application or Docket Number